Case 2:06-cv-00400-MHT-CSC Document 32-5 Filed 11/20/2006 Page 1 of 23 Facility Name: Bullock Correctional Facility Month/Y∈ 21 22 23 24 25 26 27 28 29 30 3 Hour OH60Tegretol 100MG Chew Tab 270.00 1100 Take 3 chew tab(s) by mouth Three Times Daily Prescriber: Start Date: Siddiq, Tahir Stop Date: 09-15-2006 RX #: 251309850 Hour 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 3 Phenobarbital 60mg tab 1 po 1320x 186 days ()400 1700 Runi Start Date: Prescriber: Stop Date: 9-17-06 RX #: 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 3 Hour Start Date: Prescriber: Stop Date: RX #: Hour 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 3 Start Date: Prescriber: Stop Date: RX #: Hour 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 Start Date: Prescriber: Stop Date: RX #: Hour 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 Start Date: Prescriber Stop Date: RX #: Initial Nurse's Signature Initial Documentation Codes Diagnosis Signature 1. Discontinued Order my 2. Refused Allergies 3 Patient out of facility 4 Charted in Error 5 Lock Down RTU (MHM) Housing Unit: 6. Self Administered Patient ID Number: 226420 Medication out of Stock Patient Name: 8. Medication Held 9 No Show Hampton, Randall Date of Birth: 10 Other

Case 2:06-cv-00400-MHT-CSC Document 32-5 Filed 11/20/2006 Page 2 of 23 Facility Name: Bullock Correctional Facility 02/06 Charting: Month/Year 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 Phenobarbital 60MG Tab 60.00 Take 1 tablet(s) by mouth twice daily Start Date: 09-28-2005 Prescriber: Siddio, Tahir RX#: 250676417 Stop Date: 03-26-2006 Hour 3 4.56 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 Tegretol 100MG Chew Tab 270.00 APO) Take 3 chew tab(s) by mouth Three Times Daily Start Date: 10-28-2005 Prescriber: Siddio, Tahir Stop Date: 03-27-2006 RX#: 250826266 1 2 3 Hour 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 Start Date: Prescriber: Stop Date: RX #: 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 3 Hour 2 Start Date: Prescriber: RX #: Stop Date: Hour 2 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 3 Start Date: Prescriber: 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 3 Hour Start Date: Prescriber: Stop Date: RX #: Diagnosis Initial ırs<u>e</u>'s Signature Initial **Documentation Codes** Discontinued Order 2 Refused Allergies 3. Patient out of facility 4. Charted in Error 5. Lock Down Housing Unit: Population 6. Self Administered Patient ID Number: 226420 7 Medication out of Stock Patient Name: 8. Medication Held 9 No Show Hampton, Randall Date of Birth: 10 Other

Case 2:06-cv-00400-MHT-CSC Document 32-5 Filed 11/20/2006 Page 3 of 23 Facility Name: Bullock Correctional Facility Sharting: 02/06 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 Month/Yea Hour 5 6 7 8 9 10 11 12 13 14 Book 0400 Phenobarbital 60MG Tab 60.00 MMMM Take 1 tablet(s) by mouth twice daily 1700 LKE & LIKEK EIRE HKUZI LK BARYON Start Date: Prescriber: 09-28-2005 Siddio, Tahir Stop Date: 03-26-2006 RX#: 250676417 Hour 3 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 Tegretol 100MG Chew Tab 0400 270.00 1100 HLK91 Take 3 chew tab(s) by mouth Three Times Daily Start Date: Prescriber: 10-28-2005 Siddio, Tahir Stop Date: 03-27-2006 250826266 RX #: Hour 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 Bactrim DS + po BID XIOdays 1100 1700 Start Date: 2/6/06 Prescriber: Dr. Siddig Stop Date: 2/16/06 RX #: Hour 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 Start Date: Prescriber: RX# Hour 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 3 Start Date: Prescriber: Stop Date: RX #: Hour 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 3 Start Date: Prescriber: Stop Date: RX #: Diagnosis Initial Initial **Documentation Codes** Discontinued Order B 2. Refused Allergies NKDA 3. Patient out of facility jk , Caker 5 4. Charted in Error 5 Lock Down Alexander 196 Population Housing Unit: 6 Self Administered Patient ID Number: 226420 7 Medication out of Stock Patient Name: 8. Medication Held 9 No Show Hampton, Randall Date of Birth: 10 Other

Case 2:06-cv-00400-MHT-CSC Filed 11/20/2006 Document 32-5 Page 4 of 23 Facility Name: Buliock Correctional Facility Charting: Month/Ye 01/06 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 Phenobarbital 60MG Tab Take 1 tablet(s) by mouth twice daily SIK MIKINGIKINIKIK & QUKIKIKKE KKIKIK A BUKIK & BUKI Start Date: 09-28-2005 Prescriber: Siddio, Tahir Stop Date: 03-26-2006 RX#: 250676417 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 3 Tegretol 100MG Chew Tab 270.00 多的多多多多 Take 3 chew tab(s) by mouth Three MIKIKIK W SUKKIKIKIK KEKIKIKI Times Daily Start Date: 10-28-2005 Prescriber: Siddio, Tahir Stop Date: 03-27-2006 RX#: 250826266 Hour 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 3 Start Date: Prescriber: Stop Date: RX #: 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 3 Start Date: Prescriber: Stop Date: RX #: 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 3 Start Date: Prescriber: Stop Date: RX #: 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 3 Start Date Prescriber: Stop Date: RX #: Diagnosis Nurse's Signature Initial Nurse's Signature Initial Documentation Codes Discontinued Order 2 Refused Allergies 3. Patient out of facility 4 Charted in Error 5. Lock Down Population Housing Unit 6 Self Administered Patient ID Number: 226420 7 Medication out of Stock Patient Name: 8 Medication Held 9. No Show KYOH Hampton, Randall Date of Birth: 10. Other

Case 2:06-cv-00400-MHT-CSC Filed 11/20/2006 Document 32-5 Page 5 of 23 Facility Name: Bullock Correctional Facility Hour 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 Phenobarbital 60MG Tab 60.00 Take 1 tablet(s) by mouth twice daily Start Date: 09-28-2005 Prescriber: Siddio, Tahir Stop Date: 03-26-2006 RX#: 250676417 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 DUM Tegretol 100MG Chew Tab 270.00 MMA Take 3 chew tab(s) by mouth Three Times Daily Start Date: 10-28-2005 Siddio, Tahir Stop Date: 03-27-2006 RX#: 250826266 Hour 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 3 Start Date: Stop Date: RX# Hour | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 3 Start Date: Prescriber: Stop Date: RX #: 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 3 Start Date: Prescriber: Stop Date: 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 3 Hour Start Date: Prescriber: Stop Date: RX# Diagnosis Nurse's Signature Initial Nurse's Signature Initial Documentation Codes Discontinued Order 2 Refused Allergies 3 Patient out of facility 4 Charted in Error 5 Lock Down Population Housing Unit: 6 Self Administered Patient ID Number: 226420 . Medication out of Stock Patient Name: 8 Medication Held 9. No Show Hampton, Randall Date of Birth: 10 Other

Case 2:06-cv-00400-MHT-CSC Filed 11/20/2006 Document 32-5 Page 6 of 23 Facility Name: Bullock Correctional Facility ✓ Month/Ye 11/05 11 12 13 14 15 16 17 18 19 20 21 Tegretol 100MG Chew Tab 90.00 Chew 3 tablets by mouth Three Times Daily Start Date: 09-15-2005 Prescriber: Siddio, Tahir Stop Date: 03-13-2006 RX #: 250612653 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 Phenobarbital 60MG Tab 60.00 Common with 0040 ra Corlor moment milm (m; Take 1 tablet(s) by mouth twice daily Start Date: 09-28-2005 Prescriber: Siddio, Tahir 03-26-2006 RX#: 250676417 Stop Date: 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 Start Date: Prescriber: Stop Date: RX #: Hour 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 3 Start Date: Prescriber: Stop Date: RX #: Hour 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 3 Start Date: Prescriber: Stop Date: RX #: Hour 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 3 Start Date: Prescriber: Stop Date: Diagnosis Initial Initial Nurse's Signature Documentation Codes 1. Discontinued Order 2 Refused Allergies NKDA 3. Patient out of facility 4. Charted in Error 5. Lock Down Population RTU(NHM) Housing Unit: 6 Self Administered 226420 Patient ID Number: 7 Medication out of Stock Patient Name: 95 8 Medication Held 9 No Show Hampton, Randall pp Date of Birth: 10 Other

Case 2:06-cv-00400-MHT-CSC Document 32-5 Filed 11/20/2006 Page 7 of 23 Facility Name: Bullock Correctional Facility Month/Ye. Charting: 10/05 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 Hour 3 Phenobarbital 60MG Tab 60.00 ~1 twice daily 0 Start Date: 04-06-2005 Prescriber: Siddio, Tahir 10-02-2005 RX#: 250256163 Stop Date: 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 Tegretol 100MG Chew Tab 270.00 Chew 3 tablets by mouth Three Times Daily 1700 Start Date: 09-15-2005 Prescriber: Siddio, Tahir RX#: 250612653 03-13-2006 Stop Date: Hour 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 Phenobarbital Gong MIF 1700 Start Date: 10-3-05 Prescriber: Siddig Stop Date: 4-3-05 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 3 Start Date: Prescriber. Stop Date: Hour 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 3 Start Date: Prescriber: Stop Date: RX #: 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 3 Hour Start Date: Prescriber: Stop Date: RX #: Diagnosis Nurse's Signature Initial Nurse's Signature Initial **Documentation Codes** Discontinued Order 2 Refused Allergies 3. Patient out of facility 4 Charted in Error 5. Lock Down RTU (MHM) Housing Unit: 6. Self Administered Patient ID Number: 226420 7 Medication out of Stock Patient Name: 8 Medication Held 9 No Show Hampton, Randall 10 Other Date of Birth:

Case 2:06-cv-00400-MHT-CSC Filed 11/20/2006 Page 8 of 23 Facility Name: Bullock Correctional Facility Sharting: Month/Ye. Month/Ye. Charting: 10/05
Hour | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 Phenobarbital 60MG Tab 60.00 ~1 twice daily Start Date: 04-06-2005 Prescriber: Siddio, Tahir Stop Date: 10-02-2005 RX #: 250256163 1 2 3 4 5 6 7 8 9 10 11 2 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 Tegretol 100MG Chew Tab 270.00 Chew 3 tablets by mouth Three Times Daily Start Date: 09-15-2005 Prescriber: Siddio, Tahir Stop Date: 03-13-2006 RX#: 250612653 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 Tegretol 300mg POTID XIBOLAYS OUPO 100 at a well white white he was a well of the way of t Start Date: 0/27/05 Stop Date: 3/2 7/65 RX #:

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Medication out of Stock

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Diagnosis Allergies NION RTU (MHM) Housing Unit: 6 Self Administered 226420 Patient ID Number: 7 Medication out of Stock Patient Name: 8. Medication Held mJ 9 No Show Hampton, Randall Date of Birth: 10 Other

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	Appl. Date: May 100 ery, AL	9			BUORES	
Montgom	e gitt	Naph	Care			
260-28	8,8	Hospital/Consult	tant Referral Form			
	Inmate Name; Randall		us#: <u>226420</u>	Date: 4-23	3	
	DOB: 10-15-83 Race:	B Sex: M	Allergies: NKA		and the second second	
	History of working diagnosis (when symptoms, current resiments):	first recognized, progressio	n of symptoms, physical	findings, lab results	s, current	
	Name of the state	Rack	of Church	g g (u	And distributions	
	· · ·	rullund	const			
	SERVICES REQUESTED/PROV	DER:	dig.			
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	OFFSITE HEALTHCARE REPO		EW Kestini Her Ches Y	NAVE AVE	Stowner HSA	22/ES
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	Orders/Recommendations:					
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					A CONTRACTOR OF THE CONTRACTOR	
	Physician:	Da	te:	Time:		
	Notify (Facility):	St. #1 ()	· 			

Bill to NaphCare 950 22nd St. N. Suite 825 Birmingham, AL. 35203 Beverly Douglas, R.N. Utilization Review Manager* 205-458-8370 or 1-800-771-0315

Advanced Medical Directive: Yes _____ (Attached) No ____

Appt.	Date:	
Appt.	Date.	

Auth #:	
Auu #.	

NaphCare Hospital/Consultant Referral Form

Inmate Name: Kandall	Hampton AIS#: 226	420 Date: 4-23-03	-
DOB: 10-15-83 Race: 7	Sex: M Allergies: M	K.A.	
symptoms, current treatments):	achud wn	mp ofler	- - - -
4/21103	Signature (M.D.):	Jang	- - -
	is: SZ. disorder		•••
	5011 Ti		
Receiving Facility/Hospital: 10f.	Chung Ret	ırn Time:	
Route of Transportation: (X) An	nbulance OC Van Other:		 .
Date & Result/Last PPD; 18922.	52 tmm Date & Result/La	st Chest X-Ray Nove	NevHSA
OFFSITE HEALTHCARE REPOR	RT:	00000	- 4/22/5
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Orders/Recommendations:			
Physician:	Date:	Time:	
Notify (Facility):	at: #()	of patient's discharge	
Advanced Medical Directive: Yes_			
		Date:	
Signature & Title:		Date:	

FILE	E-2:06-cv-0,0400-1019-1-CSC Document 32-5-4-USERILEC NAP/20072006 Page 16 04.23 01/01 PAGE 2
Dr. Chung 16936Winbn	Apple Date: April 9 at 3 pm 030409BUORD Z Blownt
Mo <i>nt</i> gome 334 - <i>260</i>	NaphCare -2288 Hospital/Consultant Referral Form
	Inmate Name: Randall Hampton AIS#: 226420 Date: 4-9-03
	DOB: 10-15-83 Race: B Sex M Allergies: NKA
	History of working diagnosis (when first recognized, progression of symptoms, physical findings, lab results, current symptoms, current treatments):
	SERVICES REQUESTED/PROVIDER: Finishmed Head J differential
	Pertinent Chronic Conditions/Diagnosis: SZ Olsover DOC Facility: Bullock 5011 Time Out: Receiving Facility/Hospital: Dr. Chung Return Time:
	Rouse of Transportation: (X) Anibulance
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	In the may have on bent to a print formanded one
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	Physician: Date: 1600 Time: Notify (Facility): at # () of patient's discharge. Advanced Medical Directive: Yes (Attached) No Report called to: (Name/Title): Date: Signature & Title: Date:
	Piller North Country of a good Country of

Bill to NaphCare 950 22^{ad} St. N. Suite 825 Birmingham, AL. 35203 Beverly Douglas, R.N. Utilization Review Manager* 205-458-8370 or 1-800-771-0315

04/09/21 FILE No	303 2:06:45-004005-MHT-CSC Document 32-5 Filed 11/20/2006 Page 17 0f 23 01/01 .703 04/09 03 08:: NAPHCARE BULLOCK FAX
Dr. Chung 936Winten	Apple Date: April 9 at 3 pm 030409BUOROZ Blownt
Mo <i>ntgome</i> 334 - <i>260</i>	y, AL NaphCare
234. 26A	- 2288 Hospital/Consultant Referral Form
501 200	22 4-9-23
	bumate Name: Kandall Hampton AIS#: 226420 Date: 4-9-03
	DOB: 10-15-83 Race: B Sex: M Allergies: NKA
	History of working diagnosis (when first recognized, progression of symptoms, physical findings, lab results, current
	allocate bustments.
	If a present on nothing
	e displacement & deformity.
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	Signature (M.D.):
	Pertinent Chronic Conditions/Diagnosis: \$2 O Society Time Out:
	Loc Pating. 104/182
	Receiving Lectural Lossian
	Route of Transportation: (X) Antibulance (DOC Van) Other.
	Date & Result/Last PPD: 12-32-02 5 mm Date & Result/Last Chest X-Ray NONE OFFSITE HEALTHCARE REPORT: Showner HSA 4/9/03
	OFFSITE HEALTHCARE REPORT:
	Orders/Recommendations:
	Physician: Date: Time:
	Notify (Facility): of patient's discharge.
	Advanced Medical Directive: Yes (Attached) No
	Report called to: (Name/Trile):

Bill to NaphCare 950 22nd St. N. Suite 825 Birmingham, AL. 35203 Beverly Douglas, R.N. Utilization Review Manager* 205-458-8370 or 1-800-771-0315

Signature & Title:



Advanced Medical Imaging Center US Diagnostic, Inc.

MARC SONNIER, MD 02-07-03 PO BOX 56 ELMORE, AL 36025

HAMPTON, RANDALL

DOB: 10-15-83 PATIENT NO: 64532 **EXAM: CT BRAIN 02-06-03**

REASON FOR EXAM: FALLING & HITTING HEAD

CT BRAIN:

The patient refused intravenous contrast.

The ventricles are normal in size without midline shift. There are no areas of hemorrhage or mass. The visualized portions of the mastoid and paranasal sinuses are clear.

IMPRESSION:

- 1. Patient refused intravenous contrast.
- Normal study.

EP VINING, MD

EPV/lgh

Ĉ	ppt. Date: ase 2:06-cv-00400-MHT-CSC Document 32-5 Filed 11/20 20 6 Page 19 NaphCare (National Prison HealthCar	of 23
	Hospital/Consultant Referral Form 030804 57x	RAL
Im	mate Name: Hampton Randall AIS#: 226420 Date: 1-30-03	, NO0 *
D	OB: 10-15-83 Race: B Sex: M Allergies: NEA	
Hi syr	istory of working diagnosis (when first recognized, progression of symptoms, physical findings, lab results, current /mptoms, current treatments): 19 40 BM 2 by closed head injury '95	(In 586)
_ <u>/`</u>	Imptoms, current treatments): 19 40 BM i by closed herd injury '95 resulting in Senginer on Tegrated + Phenotone also has 5 chino offectine Diserker on Heled + Cogentin	
	women was DIC et 1-7-03 trad Violant attach + pu	7
15 m SI	ERVICES REQUESTED/PROVIDER: Killy had lucisition repaire	
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	There I a heart Signature (M.D.):	
(EL) Pe	ertinent Chronic Conditions/Diagnosis: Segum	
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<u>Da</u>	ate & Result/Last PPD: 12/22/02 OMM Date & Result/Last Chest X-Ray	*
O	FFSITE HEALTHCARE REPORT:	
		
Or	rders/Recommendations:	
· 		
	hysician: Date: Time:	
	otify (Facility):	
	dvanced Medical Directive: Yes (Attached) No eport called to: (Name/Title): Date:	
Sig	ignature & Title: E, Elin /RV Date: 1/30/02	

Bill to NaphCare 950 22nd St. N. Suite 825 Birmingham, AL. 35203 Sharon Hauser, R.N. Director of Utilization Review* 205-458-8370 or 1-800-771-0315

	տու լուոյ յանոնցերին բանք անիկան ան հանահերան հանահերան բանն անել անիկ <u>գե</u> ր2ն 9630√-004006MHTCS610NPpo cument 32-5 ԷՈԶԵԶՈՒ2 0/2 09 6 Page 2010£23 չ
	Harpitala angulgan Referral Furm (1)307 O1/2 TXR = 2
	Immate Name: Harry to Randall AISE: 2.26 4.20 Date: 1-3003
	DOB: 10-13-X3 Recon B Sex 111 Allergies. NEW
7 1:8- 87.	symptoms, current treatments): 19 ha B m = Let Closed Lend ingram '95 (Se. 586) regularing on Segment on Tagache & Planeture Adoc
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	Fertinent Chronic Conditions/Diagnosis:
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	Route of Transportation: (X) Ambulance
	OFFSITE HEALTHCARE REPORT:
	Orders/Recommendations:
	Physician:
	Report called to: (Name/Title); Signature & Title: E: Eddin : Row Date: 1/30/02

Bill to NaphCare 950 22nd St. N. Suite 825 Birmingham, AL. 35203 Sharon Hauser, R.N. Director of Utilization Review* 205-458-8370 or 1-800-771-0315



Laboratory Corporation of America

Order Status Final

6/12/2006

Order Status. Finai			•	•
ACCESSION #		ACCO	DUNT#	
163-205-5538-0		01389085		
I	PATIENT	NAM	E	
HAMPTON,RAN	DALL			
PATIENT ID#	D.O.B.		AGE	GENDER
226420	10/15/1	983	22 / 7	M
PATIENT PHONE #		CHA	RT#	
000-000-0000				
REF	ERRING	PHYS	ICIAN	
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LAB ORDER#		DRA'	WN	
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RECEIVED		REPO	ORTED	

6/13/2006

7:47

Bullock Correctional Prison Health Service 104 Bullock Dr.	•	
Union Springs,	AL 36089-5107	
	FASTING: N	

 $TESTS\ ORDERED:\ Carbamazepine (Tegretol),\ Serum,\ Phenobarbital,\ Serum$

Result Name	Normal	Abnormal	Reference Range	Lab
Carbamazepine(Tegretol),	Serum 8.1		4.0 - 12.0 ug/mL	MB
	In conjunction	with other	antiepileptic drugs	
		The	rapeutic 4.0 - 8.0	
		Tox	icity 9.0 - 12.0	
			•	
			Carbamazepine alone	
		The	rapeutic 8.0 - 12.0	
			•	
		De	tection Limit = 0.5	
		< 0.5 ind	icated None Detected	
Phenobarbital, Serum	20		15 - 40 ug/mL	MB
		De	tection Limit = 2	
		<2 indi	cates None Detected	

LAB: MB LabCorp Birmingham

DIRECTOR: John Elgin N MD

1801 First Avenue South, Birmingham, AL 35233-0000

6/13/06

<u>LabCo</u>	rp		- · ·		1801 First .	Birmingham Avenue South m, AL 35233			Phone: 205-58	
Specimen Num 080-205-56			Patient III 120)	Control Number 51653664298	Account Number 01389085	-	Account Phone Number 834-738-562!		ry Route
Patient Last Name Patient Last Name						Account Address Bullock Correctional Facility				
Patient First Name RANDALL			Patient Middle Name		Prison Health Services					
Patient SS#		Pat	ient Phon	ie	Total Volume	104 Bu	llock	Dr.		
Age (Y/M/D) 22/05/06		ate of Birth /15/8	3	Sex M	Fasting	Union	Spring	JS AL 3608	89-5107	
Patient Address						Additional Information				
									PROV:	
	Date and Time Collected Date Entere 03/21/06 07:00 03/21/0			Date and Time Reported 03/22/06 07:48ET		Physician Name NP		NPI	Physician SIDDIQ	TD .
Carbamazepine	(Tegr	etol),	Seru	m; Phe	Tests Or enobarbital, Se	dered erum				
	TESTS				result	FLAG	UNI	ts refer	ENCE INTERVA	AL LAB
Carbamazepi	ne (T	egret	o1),		um 8.0 In conjunct:	ion with o	Ther Toxi Ther	mL antiepilepapeutic 4 city 5 Carbamazepapeutic 8	1.0 - 8.0 9.0 - 12.0 pine alone 3.0 - 12.0	
Phenobarbit	al,	Serum			19		uq/		15 - 40	ME

MB: LabCorp Birmingham
Dir: John Elgin, MD
1801 First Avenue South, Birmingham, AL 35233
For inquiries, the physician may contact: Branch: 800-659-3324 Lab: 205-581-3500

Jall 3/22/0

HAMPTON, RANDALL 226420 080-205-5666-0 Seq#0013

Detection Limit = 2

Case 2:06-cv-00400-MHT-CSC

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KILBY CORRECTIONAL FACT PO BOX 11 MT. MEIGS, AL 36057

Hampton, Kandall

7 PRISON ID

DATE SUBMITTED

5905

			BUCF 122
TEST NAME	RESULT	REFERENCE RANGE	COMMENTS
HIV ANTIBODY		NEGATIVE (NEG)	
RPR	NR	NON-REACTIVE (NR)	
URINALYSIS			
APPEARANCE			
pН		pH 5- pH 6	
PROTEIN		NEGATIVE (NEG)	
GLUCOSE		NEGATIVE (NEG)	
KETONES		NEGATIVE (NEG)	
BILIRUBIN		NEGATIVE (NEG)	
BLOOD		< 5 RBC/MCL	
NITRITE		NEGATIVE (NEG)	
UROBILINOGEN		< 1.0 MG/DL	
LEUK. ESTERASE		NEGATIVE (NEG)	
SPECIFIC GRAVITY		1.016-1.022	

"A" These results are unreliable due to the age of the specimen.

"H" These results are unreliable due to the hemolyzed condition of the specimen.

"A+H" These results are unreliable due to the age and hemolyzed condition of the specimen.

CLIA ID NO. 01D0706289

WAYNE D. MERCER, PHD LABORATORY DIRECTOR